

SCC eFile	2014 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	214509428						
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: THE CHEVY CHASE LAND COMPANY OF MONTGOMERYCOUNTY, MARYLAND</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: B HAYES MCCARTY 1942 UPPER LAKE DRIVE RESTON, VA</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: FAIRFAX COUNTY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: MD</p> </div> <div style="width: 35%;"> <p>DUE DATE: 2/28/2014</p> <p>SCC ID NO: F0301590</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">CLASS</th> <th style="text-align: left;">AUTHORIZED</th> </tr> <tr> <td>COMA</td> <td>350,000</td> </tr> <tr> <td>COMB</td> <td>350,000</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	COMA	350,000	COMB	350,000
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COMB	350,000							
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="text-align: center;">ADDRESS: 8401 CONNECTICUT AVENUE PENTHOUSE SUITE</p> <p style="text-align: center;">CITY/ST/ZIP: CHEVY CHASE, MD 20815</p>								
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>								
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: DAVID MAXWELL SMITH TITLE: PRESIDENT ADDRESS: 8779 MANOR ROAD CITY/ST/ZIP/CO: PRESTON PLACE TOWNHOMES CHEVY CHASE, MD 20815 </td> <td style="width: 10%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">OFFICER</td> <td style="width: 10%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 10%; text-align: center; vertical-align: middle;">DIRECTOR</td> </tr> </table>			NAME: DAVID MAXWELL SMITH TITLE: PRESIDENT ADDRESS: 8779 MANOR ROAD CITY/ST/ZIP/CO: PRESTON PLACE TOWNHOMES CHEVY CHASE, MD 20815	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR	
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KATHARINE K FARR DIRECTOR 5329 POTOMAC AVE, N.W. WASHINGTON, DC 20016	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	FRANCIS ANDREW JOHNSTON DIRECTOR 330 LAKE ROAD JUNCTION CITY, CA 96048	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RIA JOHNSTON BISSEL DIRECTOR 4645 1ST AVE, N.E. SEATTLE, WA 98105	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAMES M JOHNSTON, III DIRECTOR 4301 TORCHLIGHT CIRCLE BETHESDA, MD 20816	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MALCOLM MARSHALL, JR DIRECTOR 5415 BLACKISTONE ROAD BETHESDA, MD 20816	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BRUCE HAYES MCCARTY DIRECTOR 1942 UPPER LAKE DRIVE RESTON, VA 20191	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN A MCGRAW DIRECTOR 5603 OVERLEA ROAD BETHESDA, MD 20816	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ GEOFFREY SAUVE FLAHERTY SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	GEOFFREY SAUVE FLAHERTY, VP/CFO PRINTED NAME AND CORPORATE TITLE	2/21/2014 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			